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## BIB DATA SHEET

CONFIRMATION NO. 6111

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT      | ATTORNEY DOCKET<br>NO.                                       |
|--|---|--|---------------------|--|
| 10/524,399   | 02/11/2005<br>RULE  | 435  | 1636                | TX/4-32608A  |
| <b>APPLICANTS</b><br>Andreas Krause, Allschwil, SWITZERLAND;<br>Detlef Niese, Freiburg, GERMANY;<br>Friedrich Raulf, Freiburg, GERMANY;<br>Andreas Scherer, Rheinfelden-Herten, GERMANY; |   |  |                     |  |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP03/09292 08/21/2003 / LMM/ 2/6/2008<br>which claims benefit of 60/405,225 08/22/2002                               |   |  |                     |  |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |  |                     |  |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b>   |   |  |                     |  |
| Foreign Priority claimed   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | <input type="checkbox"/> Met after Allowance | STATE OR<br>COUNTRY | SHEETS<br>DRAWINGS   |
| 35 USC 119(a-d) conditions met   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  | SWITZERLAND         | 0  |
| Verified and   | /LAURA MCGILLEM<br>MITCHELL/  | Initials                                     |                     | TOTAL<br>CLAIMS  |
| Acknowledged   | Examiner's signature  |  |                     | 11   |
| INDEPENDENT<br>CLAIMS  |   |  |                     |  |
| 2  |   |  |                     |  |
| <b>ADDRESS</b><br>NOVARTIS<br>CORPORATE INTELLECTUAL PROPERTY<br>ONE HEALTH PLAZA 104/3<br>EAST HANOVER, NJ 07936-1080<br>UNITED STATES  |   |  |                     |  |
| <b>TITLE</b><br>Diagnosis of chronic rejection   |   |  |                     |  |
| <b>FILING FEE RECEIVED</b><br>900  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                     | <input type="checkbox"/> All Fees                            |
|  |   |  |                     | <input type="checkbox"/> 1.16 Fees (Filing)                  |
|  |   |  |                     | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
|  |   |  |                     | <input type="checkbox"/> 1.18 Fees (Issue)                   |
|  |   |  |                     | <input type="checkbox"/> Other _____                         |
|  |   |  |                     | <input type="checkbox"/> Credit                              |